AZ MU-AMENDMENT

ARIZONA MORTGAGE LICENSE CHANGE APPLICATION

Arizona Department of Financial Institutions Licensing Division 2910 North 44th Street, Suite 310 Phoenix, Arizona 85018

Telephone: 602.255.4421 Facsimile: 602.381.1225

Website: AzDFI.gov Electronic Mail Box: licensing@azdfi.gov

Instructions

CHANGES must be reported in a timely manner, penalties may be assessed for not complying.

Authorized Signor, this application will ONLY be accepted if: it is the original signed application and is signed by an **Owner/Officer/Member on file** with our Department.

Original license must be returned, otherwise there is a \$100 duplicate fee charged for each license not returned. (post a copy of the current license, until you receive the original amended license). If you are making more than one change to your license and you are paying the \$100 duplication fee because you are unable to return the original license; then the duplicate license fee will only need to be paid once.

Order fingerprint cards from our website http://www.azdfi.gov/Licensing/RFP.htm . Fingerprints must be taken by a law enforcement agency. Only one (1) completed fingerprint card per person is required.

Fees: Submit one (1) check for the total of all fees required except for the fingerprint card fees. Make check payable to the, Arizona Department of Financial Institutions or AZDFI and drop off or mail to 2910 North 44th Street, Suite 310, Phoenix, AZ 85018. The Department will not accept credit or debit cards or an electronic submission of this application.

Legibly Print or Type All Information

Duplicate license fee \$100

Duplicate being requested - License Number ____

- Fingerprint Processing Fees Must Be On A Separate Check From All Other Fees.
- Change / Checklist All Items Must Be Submitted Altogether At The Same Time
- Complete This Change Application Sections #1, 2 & 3 Below For All Change Types

Office Closure or No Return original license(s) Complete This Change A	- Or written list of lice	nse numbers t	for location	s closing.		
A. As authorized representat number(s).	ive (as shown in sectio	on #3) for the li	censee I w	rish to close th	e attached	d license(s) / license
Signature		Print Nar	ne			
B. Records must be maintain pursuant to Arizona statute. B			re the Ariz		ill be locat	ed.
Address:			City:		State:	Zip Code:
Contact Person:	Telephone Number:	Fax Number		Email Address		
Duplicate License Ro ☐ Complete This Change A	•		ow and this	s page		

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Check change type(s) being requested:

☐Office Closure ☐Duplicate Lice	ense 🔲Na	me	Iress 🗌]Respo	nsible Individ	ual 🗌Off	icer
Complete This Change Applicatio	n Sections	#1, 2 & 3	Below F	or All	Change Typ	es	
1. Principal Licensed Location Info	rmation (fou	und on prin	Cipal lice Principal Ariz		Number:		
Exact Name of Licensee:							
Exact DBA / Trade name if applicable:							
Address on your "Principal" license:				City:		State:	Zip Code:
Telephone Number:	Fax Number:	_			Toll Free Numbe	er: _	
2. Individual to contact regarding th	ne processi	ng of this c	hange:		()		
Name:		Title:			Email Address		
Have you attached ALL of the required Yes No IF NOT, DO NOT subm							
Direct Telephone Number & Extension:	Fax Number:				Toll Free Number	r:	
() – ext.	()	_			()	-	
3. Authorized Individual: I hereby comisrepresentations or omissions of sign this form.							
Signature:	Print Name:				Print Title:		Date:
Direct Telephone Number & Extension: () – ext.	Fax Number:			Toll Free Number			
Name Change Checklist Complete This Change Application \$250 name change fee for each list Return original license(s) or pay to Original bond rider with new name If, Corporation; we need a copy of And, if a foreign corporation; we religible If DBA name, a copy of the trade Name and or DBA Name Change	icensed loca he duplicate e f the approve need a copy name certific	ition license fee ed amended of the appro	of \$100 d articles oved Arizo	ona fore	ign authorizat	ion	
New Exact Name:	•				D	Date Name Chang	ed or Will Change:
New Exact DBA / Trade name if applicable:						/	/
Address Change Checklis Complete This Change Application \$50 change of address fee Return original license or pay the If the location is a commercial of submitted. Only submit the pages that Licensee must designate a person oversee more than one location.	on Sections # duplicate lic office locatio at include the	ense fee of n; a copy o lessee / les	\$100 f the leas ssors and	se agre	ement in the in address and	the signate	ure page.

Address Change Continued on page 3 & 4.

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Verification Required for all Licensed Locations

A.R.S. §§ 6-903(O) and 6-944(A) state, in pertinent part, that a mortgage broker license and a mortgage banker license are "**not transferable or assignable**" without the prior written consent of the superintendent.

Engaging in any of the activities listed below, commonly referred to as "net branching," can result in the Department taking regulatory enforcement action up to and including license revocation and the imposition of a civil money penalty of not more than **five thousand dollars** (\$5,000.00) for each violation for each day. THIS IS NOT AN EXHAUSTIVE LIST.

- DON'T transfer or assign your mortgage broker or banker license to "branch managers" or "owners."
- **DON'T** require branch managers to pay for branch start up costs, including, but not limited to, the cost of branch office licenses, bank account deposits, background checks, accounting fees, HUD license fees, security deposits, training, payroll fees, and loan software fees.
- **DON'T** require branch managers to sign agreements to pay monthly fees for using your license.
- DON'T fail to assume responsibility and liability for branch office leases that are rightfully your responsibility. You or your designated officers should sign rent and equipment leases, not branch managers.
- **DON'T** fail to assume the responsibility and liability for branch office equipment leases that are rightfully your responsibility. Branch managers should not sign these leases.
- **DON'T** fail to assume the responsibility and liability for utilities, office supplies and equipment, appraisals, alarm equipment, and any other bills incurred by branches. Bills, utilities, and invoices should be in licensee's name.
- **DON'T** inform the Better Business Bureau that your branches are independent.
- **DON'T** fail to account for all branch income and expenses on tax returns and on financial statements.
- **DON'T** fail to maintain physical access to your branches at all times.
- **DON'T** fail to maintain control over the payment of your branch expenses.
- DON'T fail to maintain a uniform settlement service fee structure among all of your branch offices. Borrowers should be able to pay the same fees at any office. You should not allow branch managers to set their own fee structure.
- **DON'T** pay W-2 income to companies owned by branch managers in an attempt to evade taxes.
- **DON'T** fail to employ practices and procedures consistent with all HUD guidelines.
- DON'T fail to maintain control over branch bank accounts or allow branch managers to write payroll checks and reimburse themselves for expenses.

Verification Required for all Locations (continued)

For more information, please access www.hudclips.org and click on "Access HUD Letters and Notices from past years" to read, among other things, Mortgagee Letter 00-15, which addresses "Prohibited Branch Arrangements."

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5. Licensed location that Is changing	ng their	address:							
License Number for this location:		Date Address Changed or Will Change:			This Licensed Location Property is ZONED as (check one):				
		/ /		☐ Commercial ☐ Residential					
Current Address on license:			City:			State:	Zip Code:		
	1				I =				
Telephone Number:	Fax Nu	mber:			Toll Free Numb	er:			
C The shave licensed leastion (#5.6	, povo)) -			()	_			
6. The above licensed location (#5 a Designated Branch Manager (Overseer or Contact Person):	above)	will be relocated to		Th	is New Location F	roperty is ZONI	ED as (check one):		
					☐ Commercial ☐ Residenti				
New Address:		City:			State:	Zip Code:			
Telephone Number:	Fax Number: Toll Free Number:				er:				
() – ext.	,			() –					
Have you read the branch verification p ☐ Yes ☐ No IF NOT, DO NOT this					application	?			
165 NO IF NOT, DO NOT this	auures	s change will not be p	10062260	l					
Must be signed by an C	•	AFFIDA V		£	:41	Da			
Must be signed by an C	wne	r/Officer/ iviem	per on	TIIC	e with o	ur vep	artment		
STATE OF	_								
COUNTY OF)ss								
COUNTY OF	_								
I, (print name and title)						as a	n Officer of		
, <u> </u>									
the licensed entity, officially state th	at the	attached address ch	ange app	lica	tion is in c	ompliance	e with A.R.S.		
§§ 6-903(O) and 6-944(A) above an	d that t	this license will not	be transf	ferre	ed or assign	ned witho	ut the prior		
written consent of the superintenden	t.								
(Date)		(Authorized Officer	's Signatur	e)					
N	lotar	rization of Si	anatu	re					
-			J =====	-					
Subscribed and sworn to before me this		day of	20						
My commission expires:		(Notary Public)							
,		() 1 40114)							

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Responsible Individual ("RI") Change - TIME SENSITIVE. Note: A licensee shall notify the Superintendent in writing that its RI will cease to be in active management of the activities of the licensee within ten days of learning that fact. You have 90 days to replace your RI with a qualified person. License will expire if RI is not replaced within the 90 days. No Exceptions.

·
Responsible Individual ("RI") Change Checklist
☐ Complete This Change Application Sections #1 through 3
Complete: The MU1 Form page 1 and AZ_MU1 Section #4
Copy of termination letter of former responsible individual (confirmation may be required)
\$250 RI processing fee (must be on a separate check from the fingerprint card fees)
Return original license or pay the duplicate license fee of \$100 RI will need to complete the following
☐ MU2 and AZ_MU2 Pages 1 through 5
☐ Employment verification letters
Fingerprint card & Fingerprint processing fee of \$24 must accompany the card
Legible copy of the RI's Arizona driver's license
We will run a credit report: If it is not satisfactory we will need a credit explanation from the applicant and proof of
debt settlement.
If applying as responsible individual for a mortgage broker's license, this person must take the mortgage broker's course and test to download the Test Registration information, list of schools and test dates (see test registration form at http://www.azdfi.gov/Licensing/Forms/MU_Forms/AZ_MU1.doc (go to the last 3 pages).
Officer, Directors Or Members Change Checklist
Changes to any individual that was previous submitted or adding a new individual.
☐ Complete This Change Application Sections #1 through 3
Complete: MU1 form page 1 and Schedule C
If applicable - amended articles of incorporation or organization adding new officer/directors/members
If applicable - copy of termination letters of former officers
IN ADDITION - Each individual will need to submit the following:

Legible copy of driver's license
If applicable – written credit explanation on any negative items past or current
Ownership / Control Change Checklist
Note: A license is not transferable or assignable and control of a licensee may not be acquired
through a stock purchase or any other device without the prior written consent of the superintendent.
Letter of explanation, providing complete details (the structure of this change may require a new license).
Items that may be applicable to the type of ownership change being made:
Complete This Change Application Sections #1 through 3
Complete: MU1 form Sections #7 and 8 and Schedule C
Copy of signed purchase agreement
Copy of stock certificates & stock ledger
Need copy of either the amended articles or new articles and an organizational chart showing new ownership.
☐ Is company / licensee amending their current articles? ☐ YES ☐ NO ☐ Is company / licensee drawing up new articles? ☐ YES ☐ NO
☐ Is company / licensee drawing up new articles?☐ Is the company changing their name? See Name Change Above.
Are the top people of the company changing? See Officer, Directors Or Members Change Above.
Percentage change in ownership: Provide "Minutes or Corporate Resolution" substantiating this change
Financials are required on companies acquiring the licensee. Audited financials are required for both the licensee
lenders (mortgage banker and commercial mortgage banker) and our Corporate Financial Statement form (located in
the AZ_MU1) for the mortgage broker licensee.
IN ADDITION Each individual that owns 20% or more controlling interest must provide the following.

Legible copy of driver's license
If applicable – written credit explanation on any negative items past or current